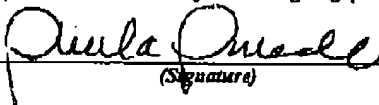


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8602860115 p. 1

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)		Docket No.
Applicant(s): EDWARD SILVER ET AL		02528 (BLL-0198)
Application No. 10/784,383	Filing Date February 23, 2004	Examiner Blount
		Group Art Unit 2612

Invention: SYSTEMS AND METHODS FOR IDENTIFICATION OF LOCATIONS

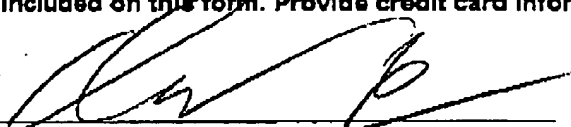
I hereby certify that this _____ Amend. Trans. Ltr and Response to Office Action
(Identify type of correspondence)
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 571-273-8300)
on July 26, 2006
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PAGE 1/10 * RCVD AT 7/26/2006 11:35:45 AM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/9 * DNIS:2738300 * CSID:8602860115 * DURATION (mm:ss):03:00

JUL 26 2006

AMENDMENT TRANSMITTAL LETTER (Large Entity)					Docket No. 02528 (BLL-0198)	
Applicant(s): EDWARD SILVER ET AL						
Application No. 10/784,383	Filing Date February 23, 2004	Examiner Blount	Customer No. 36192	Group Art Unit 2612	Confirmation No. 8406	
Invention: SYSTEMS AND METHODS FOR IDENTIFICATION OF LOCATIONS						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.						
CLAIMS AS AMENDED						
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE	
TOTAL CLAIMS	17 -	20 -	0	x \$50.00	\$0.00	
INDEP. CLAIMS	3 -	4 -	0	x \$200.00	\$0.00	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00	
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00	
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. 06-1130 in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account 06-1130 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 Signature			Dated: July 26, 2006			
David A. Fox Registration No. 38,807 CANTOR COLBURN LLP 55 Griffin Road South Bloomfield, CT 06002 Telephone 860-286-2929 Facsimile 860-286-0115 Customer No. 36192			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on _____ (Date) Signature of Person Mailing Correspondence Typed or Printed Name of Person Mailing Correspondence			
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT:	Edward Silver et al)	
)	
SERIAL NO.:	10/784,383)	ART UNIT:
)	2612
FILED:	February 23, 2004)	
)	EXAMINER:
FOR:	SYSTEMS AND METHODS FOR)	Blount
	IDENTIFICATION OF LOCATIONS))	

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 name
signature 7/26/06 date

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Applicants respectfully request consideration of the following amendments and remarks contained herein in response to the Office Action mailed April 26, 2006. Applicants respectfully submit that the amendments and remarks contained herein place the application in condition for allowance.

02528 (BLL-0198)

1